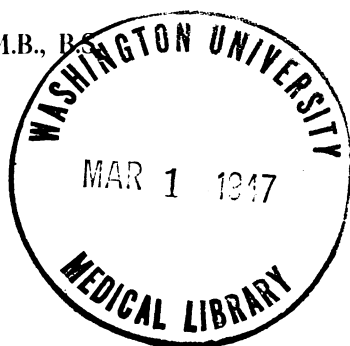


THE  
BRITISH JOURNAL  
OF  
VENEREAL DISEASES

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HONORARY EDITOR

V. E. LLOYD, M.C., M.B., B.S.



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and municipal authorities. The young women and girls who formed the human material of the study were those who had been reported as contacts by male patients with venereal disease, or who had been under treatment for venereal disease at the San Francisco City Clinic and were found to have been promiscuous in their behaviour. About 80 per cent of the 287 patients classed as promiscuous were found to have some venereal disease. A further 78 were classed as "potentially promiscuous"; that group showed a somewhat lower percentage of infection, in some cases acquired maritally. A few non-promiscuous cases of congenital syphilis were also dealt with.

The authors of the report were not themselves concerned with the treatment of the disease, but only with the causes of promiscuity. They used both informal interviews and a number of intelligence tests in the psychological study and psychiatric treatment of their patients. Their inquiry covered age grouping, family background and relationships, education and vocational training, employment and income, housing, social relationships and recreation, previous delinquency, and sexual development and experience. The ages of the patients examined ranged from 15 to 39 years. Three-quarters of the number of promiscuous girls and women had been promiscuous before the outbreak of war (1942). The age of first sexual intercourse ranged from 11-21 years, and the great majority of married women had had voluntary pre-marital intercourse. Of the 287 promiscuous patients, only 23 were both married and living with their husbands; 54 said that their husbands were away, 68 were separated; a further 39 had been married. In endeavouring to discover the motives for promiscuity, the authors made three broad divisions—affectional (to which they assigned 10 per cent), episodic (20 per cent) and habitual (57 per cent); the remaining 13 per cent could not be classified, either because the patients' stories could not be relied on or because of insufficient information. Very full and sympathetically written case histories of patients in the three groups are given. The habitual group is further divided into (1) non-conflictual (in which such behaviour was taken for granted by the patient and her social group); (2) dependent (the drooping, want-to-be-loved girl); (3) conflictual (sometimes due to emotional "tie-ups" with parents, sometimes to matrimonial misfits); and (4) maladapted (including ex-delinquents and gaolbirds).

It is satisfactory to read that a number of the patients mended their ways after visiting the clinic, but in others so much resistance was encountered that only the necessity of treatment for the venereal disease kept them in attendance. The authors conclude that "psychiatric facilities can be used advantageously in connection with a venereal disease clinic" in the reduction of promiscuity in certain types of case.

W. T. T.

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### EDITORIAL NOTES

The Editors beg to acknowledge with thanks the receipt of the following periodicals.

*American Journal of Syphilis*

*Boletín medico-social*

*British Medical Journal*

*Crónica médica*

*Journal of the Cape Town Post-Graduate Medical Association*

*Journal of Experimental Medicine*

*Journal of Venereal Disease Information*

*Medical Times, New York*

*Medicina española*

*New England Journal of Medicine*

*Revista de la Asociación médica argentina*

*Revista del Instituto de Salubridad y Enfermedades tropicales*

*Revista médica de Chile*

*Revista médica de Yucatan*

*South African Journal of Medical Sciences*

*Urologic and Cutaneous Review*